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Substitute for form 1449/PTO  <h1>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</h1>  <i>(Use as many sheets as necessary)</i>				Complete If Known <b>Application Number</b> 10/594,292-Conf. #7344 <b>Filing Date</b> September 25, 2006 <b>First Named Inventor</b> Kuniaki Okada <b>Art Unit</b> N/A <b>Examiner Name</b> Not Yet Assigned <b>Attorney Docket Number</b> 66316(70904)	
Sheet	2	of	2		

[illegible]

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.